

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted With Initial Filing <b>OR</b> <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	100051.10731
	First Named Inventor	Scott A. Waldman
	<i>COMPLETE IF KNOWN</i>	
	Application Number	10/656,895
	Filing Date	September 5, 2003
	Art Unit	1643
Examiner Name		Stephen L. Rawlings

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**COMPOSITIONS THAT SPECIFICALLY BIND TO COLORECTAL CANCER CELLS AND METHODS OF USING THE SAME**

the specification of which *(Title of the Invention)*

☐ is attached hereto

**OR**

☒ was filed on (MM/DD/YYYY) 09/05/2003 as United States Application Number or PCT International

Application Number 10/656,895 and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

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Name			
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City	State	ZIP	
Country	Telephone	Email	
<b>WARNING:</b>			
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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
<b>NAME OF SOLE OR FIRST INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Scott A.		Family Name or Surname Waldman	
Inventor's Signature			Date
Residence: City Ardmore	State PA	Country US	Citizenship US
Mailing Address 119 Bleddyn Road			
City Ardmore	State PA	Zip 19003	Country US
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

**DECLARATION****ADDITIONAL INVENTOR(S)****Supplemental Sheet**

Page 1 of 2

<b>Name of Additional Inventor, if any</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Joshua M.			Pearlman		
<b>Inventor's Signature</b>				<b>Date</b>	
<b>Residence: City</b>	Philadelphia	<b>State</b>	PA	<b>Country</b>	US
<b>Mailing Address</b> 204 So. 12 <sup>th</sup> Street, 2 <sup>nd</sup> Floor					
<b>Mailing Address</b>					
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>ZIP</b>	19107
			<b>Country</b>	US	
<b>Name of Additional Inventor, if any</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Michael T.			Barber		
<b>Inventor's Signature</b>				<b>Date</b>	
<b>Residence: City</b>	Paoli	<b>State</b>	PA	<b>Country</b>	US
<b>Mailing Address</b> 27 East Central Avenue, Apt. G-10					
<b>Mailing Address</b>					
<b>City</b>	Paoli	<b>State</b>	PA	<b>Zip</b>	19301
			<b>Country</b>	US	
<b>Name of Additional Inventor, if any</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Stephanie			Schulz		
				<b>Date</b>	
<b>Residence: City</b>	West Chester	<b>State</b>	PA	<b>Country</b>	US
<b>Mailing Address</b>					
<b>Mailing Address</b> 117 Howard Road					
<b>City</b>	West Chester	<b>State</b>	PA	<b>Zip</b>	19380
			<b>Country</b>	US	

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705035

## DECLARATION

## ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 2 of 2

Name of Additional inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Scott J		Parkinson	
Inventor's Signature <i>S. R. Parkinson</i>		Date	
Residence: City <i>Norsham</i>	State <i>Wessex</i>	Country <i>UK</i>	Citizenship <i>Canada</i>
Mailing Address <i>4 BRITTEN CLOSE, NORSHAM</i>			
Mailing Address <i>810 X PIERCE STREET</i>			
City <i>Norsham</i>	State <i>Wessex</i>	Country <i>UK</i>	Citizenship <i>Canada</i>
Name of Additional inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
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	First Named Inventor	Scott A. Waldman	
	<i>COMPLETE IF KNOWN</i>		
	Application Number	10/656,895	
	Filing Date	September 5, 2003	
	Art Unit	1643	
<input type="checkbox"/> Declaration Submitted With Initial Filing <b>OR</b> <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)		Examiner Name	Stephen L. Rawlings

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Name							
Address							
City				State		ZIP	
Country				Telephone		Email	
<b>WARNING:</b>							
<p>Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identity theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.</p>							
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<b>NAME OF SOLE OR FIRST INVENTOR:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Scott A.				Family Name or Surname Waldman			
Inventor's Signature						Date	
Residence: City Ardmore				State PA		Country US	
						Citizenship US	
Mailing Address 119 Bleddyn Road							
City Ardmore				State PA		Zip 19003	
						Country US	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.							

**DECLARATION****ADDITIONAL INVENTOR(S)****Supplemental Sheet**

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<b>Name of Additional Inventor, if any</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Joshua M.			Pearlman		
<b>Inventor's Signature</b>				<b>Date</b>	
<b>Residence: City</b>	Philadelphia	<b>State</b>	PA	<b>Country</b>	US
<b>Mailing Address</b> 204 So. 12 <sup>th</sup> Street, 2 <sup>nd</sup> Floor					
<b>Mailing Address</b>					
<b>City</b>	Philadelphia	<b>State</b>	PA	<b>ZIP</b>	19107
			<b>Country</b>	US	
<b>Name of Additional Inventor, if any</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Michael T.			Barber		
<b>Inventor's Signature</b>				<b>Date</b>	
<b>Residence: City</b>	Paoli	<b>State</b>	PA	<b>Country</b>	US
<b>Mailing Address</b> 27 East Central Avenue, Apt. G-10					
<b>Mailing Address</b>					
<b>City</b>	Paoli	<b>State</b>	PA	<b>Zip</b>	19301
			<b>Country</b>	US	
<b>Name of Additional Inventor, if any</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])			Family Name or Surname		
Stephanie			Schulz		
				<b>Date</b>	
<b>Residence: City</b>	West Chester	<b>State</b>	PA	<b>Country</b>	US
<b>Mailing Address</b>					
<b>Mailing Address</b> 117 Howard Road					
<b>City</b>	West Chester	<b>State</b>	PA	<b>Zip</b>	19380
			<b>Country</b>	US	

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705035

## DECLARATION

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Supplemental Sheet

Page 2 of 2

Name of Additional inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Scott J		Parkinson	
Inventor's Signature <i>S. R. Parkinson</i>		Date	
Residence: City <i>Horsesham</i>	State <i>Wessex</i>	Country <i>UK</i>	Citizenship <i>Canada</i>
Mailing Address <i>4 BRITTEN CLOSE, HORSHAM</i>			
Mailing Address <i>810 X 1234567 ST</i>			
City <i>Horsesham</i>	State <i>Wessex</i>	Country <i>UK</i>	Citizenship <i>Canada</i>
Name of Additional inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
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